OFFICE OF LAND QUALITY FACILITIES DATA ANALYSIS SECTION ANNUAL MANIFEST REPORT

Report Year: 2004

RCRA ID: <u>IND 006 049 456</u>	COUNTY:	Delaware »
HANDLER NAME: Mid City Plating Company	Inc	
G BAD INDERTON SANDAR BADANINA KANDEN GUNUNUN BADARA BADARA BADARA BADARA BADARA BADARA BADARA BADARA BADARA B		
Date Received 05/05/2005 logged in by Masu/	Initial Review	DEC 2 7 2005 by Man
Hard Copy Submission: □	Comparison Review	/ _/ _/ by
Date of data entry/ by		
Electronic Submission: *	Correction Letter Sent	by
Date loaded into database <u>NEC/2 7/7005</u> by <u>Angul</u>	Correction Letter Sent	by

Staff	Form	Page	Section	Comments/Corrections Made
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ID FORM 2004

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HAZARDOUS WASTE HANDLER IDENTIFICATION FORM

Reason for Submittal and Status of Information Supplied (see instructions on pages 10 and 11) CHECK CORRECT BOX(ES)	A. Reason for Submittal: To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). To provide subsequent notification (to update site identification information). As a component of a First RCRA Hazardous Waste Part A Permit Application. As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment#). As a component of the Hazardous Waste Report.								
2. Site EPA ID Number (see instructions on page 11)	EPA ID Number: IND006049456								
3. Site Name (see instructions on page11)	Legal Name: MID CITY PLATING CO., INC.								
4. Site Location Information (see	Street Address: 921 E. CHARLES ST.	. *							
Instructions on page 11)	City, Town, or Village: MUNCIE		State: IN						
	County Name: Delaware Zip Code: 47305								
5. Site Land Type (see Instructions on page 11)	Site Land Type: Private County District Federal Indian Municipal State Other								
6. North American Industry Classification System (NAICS) Code(s) for the	A. 332813 B.								
Site (see instructions on page 11)	D.								
7. Site Mailing Address (see instructions on page	Street or P.O. 921 E. CHARLES ST.								
12)	City, Town, or Village: MUNCIE								
	State: IN								
	Country: USA		Zip Code: 47305						
8. Site Contact Person (see instructions on page 12)	First Name: RODNEY	MI:	Last Name: MUZZARELLI						
	Phone Number: 7652892374		Phone Number Extension:						
Legal Owner and Operator of the Site (see instructions on pages 12	A. Name of Site's Legal Owner:		Date Became Owner (mm/dd/yyyy):						
and13)	Owner Type: X Private County District	Federal	☐ Indian ☐ Municipal ☐ State ☐ Other						
	B. Name of Site's Operator:	Date Became Operator (mm/dd/yyyy):							
	Operator Type: Private County District Federal Indian Municipal State Other								

					EI	À ID No.	IND0060	49456		
10. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. See instructions on pages 13, 14, 15, and 16)										
A.	A. Hazardous Waste Activities									
	1. Generator of Ha	azardous Waste e of the following three cate		For Items 2 through 6, check all that apply:						
	✓ a. LQG: Greater than 1,000 kg/mo (2,200 lbs.) of non-acute hazardous				2. Transporter of Hazardous Waste 3. Treater, Storer, or Disposer of Hazardous Waste (at					
	waste; or b. SQG: 100 to waste; or	1,000 kg/mo (200 - 2,200	us.	your site) Note: A hazardous waste permit is required for this activity						
	C. CESQG: Les	ss than 100 kg/mo of non-a	4. Recycler of Hazardous Waste (at your site) Note: A hazardous waste permit may be required for this activity							
	In addition, indica	te other generator activi	ties (check all that apply)		5. Exempt Boiler	and/or Indus	trial Furnace			
	d. United State	s Importer of Hazardous V	Vaste		a. Small Q	uantity On-site	e Burner Exe	mption		
	e. Mixed Waste	e (hazardous and radioacti	ve) Generator		b. Smelting	, Melting, Ref	finingFurnace	Exemption		
					6. Underground l	njecton Cont	trol			
В.	Universal Was	te Activities			C. Used Oil Activities					
1. Large Quantity Handler of Universal Waste [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. (check all boxes that apply): Generated Accumulated				ted	1. Used Oil Transporter - Indicate Type(s) of Activity(ies) a. Transporter b. Transfer Facility 2. Used Oil Processor and/or Re-refiner - Indicate Type(s) of Activity(ies) a. Processor b. Re-refiner 3. Off-Specification Used Oil Burner 4. Used Oil Fuel Marketer - Indicate Type(s) of Activity(ies) a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner b. Marketer Who First Claims the Used Oil Meets the Specificatons					
11.	Description of	Hazardous Wastes(see instructions on p	age 16)						
					e Federal hazardous wastes ha additional page if more spaces		site. List			
	F006	F008				T				
						-				
						-	-			
			:			1				

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			EPA	ID No.	IND0060	49456	
B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.							

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12. Comments (see instructions on p	page 17)						
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accordance with a system designed to inquiry of the person or persons who n submitted is, to the best of my knowled	13. Certification I certify under penalty of law that this document and all attatchments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.						
Signature of owner, operator, or an authorized representative		Name and Official Title (type or print)			Date Signed (mm-dd-yyyy)	
M. Man 2	GENERAL MANAGER	R RODNEY MUZZAF	RELLI			2/25/05	

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OFFICE OF LAND QUALITY **ANNUAL MANIFEST SUMMARY REPORT**

REPORT YEAR 2004

FORM

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		RCRA ID	ND006049456				A O	
OFF-SITE GENERATOR NAME MID CITY PLATING CO., INC.							0 1 7005	
Hazardous Waste Description HAZARDOUS WASTE SOLID, N.O.S., 9, NA3077, PGIII, (F006) FILTER CAKE FE							M WASTEWATER	
w	aste Codes F(006						
	TSD FACILITY RCR	RA ID NUMBER	TSD FACILITY NAME LOCATION CITY AND STATE	QUANTITY S UNIT OF MEA		MGMT CODE	# OF SHIPMENTS	REJECTED/ RETURNED
1	MID000724831	MID000724831 MICHIGAN DISPOSAL BELLEVILLE, MI MICHIGAN DISPOSAL POUNDS SHORT TONS KILOGRAMS METRIC TONS		H132	12	N N		
2				POUNDS KILOGRAMS	SHORT TONS METRIC TONS			
3				POUNDS KILOGRAMS	SHORT TONS METRIC TONS			
4				POUNDS KILOGRAMS	SHORT TONS METRIC TONS			
	TRANSPORTER RO	CRA ID NUMBER	TRANSPORTER NAME					
1	IND984957563		K-COM TRANSPORT SERV	/ICES				
2		¢					_	
3							Page	<u>1</u> of <u>2</u>



OFFICE OF LAND QUALITY ANNUAL MANIFEST SUMMARY REPORT

REPORT YEAR 2004

FORM OS

		RCRA ID	ND006049456				os
	F-SITE IIPMENTS	GENERATO	OR NAME MID CITY PLAT	ING CO., INC.			
	azardous Waste Vescription	WASTE CYANII	DE SOLUTION, NOS, 6.1, UN OMS	11935, PGIII, (F008) (CYANII	DE)(SODIL	JM CARBONATE	FROM
W	aste Codes F(800					
	TSD FACILITY RCR	RA ID NUMBER	TSD FACILITY NAME LOCATION CITY AND STATE	QUANTITY SHIPPED AND UNIT OF MEASURE	MGMT CODE	# OF SHIPMENTS	REJECTED/ RETURNED
1	MID000724831		MICHIGAN DISPOSAL BELLEVILLE, MI	11000 ✓ POUNDS SHORT TONS □ KILOGRAMS ■ METRIC TONS	H073	4	N N
2				POUNDS SHORT TONS KILOGRAMS METRIC TONS			
3				POUNDS SHORT TONS KILOGRAMS METRIC TONS			
4				POUNDS SHORT TONS KILOGRAMS METRIC TONS			
	TRANSPORTER RO	CRA ID NUMBER	TRANSPORTER NAME				
1	IND984957563		K-COM TRANSPORT SERV	/ICES			
2						_	
3						Page	e <u>2</u> of <u>2</u>